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Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: <i>[Initials]</i>		TOTAL CLAIMS 14		
ADDRESS MCDERMOTT, WILL & EMERY 600 13th Street, N.W. Washington, DC 20005-3096		INDEPENDENT CLAIMS 6		
<b>TITLE</b> Broadcasting system, e-mail delivery device, delivery method and program therefor				
<b>FILING FEE RECEIVED</b> 1252	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

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